

COVER PAGE  
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER (LAST) ONETO (FIRST) BRIAN (MIDDLE) D

1. Office, Agency, or Court

Agency Name Amador County Board of Supervisors  
Division, Board, Department, District, if applicable District 5  
Your Position Supervisor

► If filing for multiple positions, list below or on an attachment.

Agency: Sierra Nevada Conservancy Position: Member/Alternate, South Central Subregion Governing Board

2. Jurisdiction of Office (Check at least one box)

- State
- Multi-County \_\_\_\_\_
- City of \_\_\_\_\_
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of \_\_\_\_\_
- Other \_\_\_\_\_

3. Type of Statement (Check at least one box)

- Annual: The period covered is January 1, 2012, through December 31, 2012.
- or-
- The period covered is \_\_\_\_\_ through December 31, 2012.
- Assuming Office: Date assumed 03/07/2013
- Leaving Office: Date Left \_\_\_\_\_ (Check one)
  - The period covered is January 1, 2012, through the date of leaving office.
  - The period covered is \_\_\_\_\_ through the date of leaving office.
- Candidate: Election Year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 1

- Schedule A-1 - Investments - schedule attached
- Schedule A-2 - Investments - schedule attached
- Schedule B - Real Property - schedule attached
- Schedule C - Income, Loans, & Business Positions - schedule attached
- Schedule D - Income - Gifts - schedule attached
- Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-  
 None - No reportable interests on any schedule

5. Verification

herein and in any attached schedules is true and complete. I acknowledge this  
I certify under penalty of perjury under the laws of the State of California t

Date Signed October 9, 2013  
(month, day, year)

Signature

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
ONETO BRIAN D

1. Office, Agency, or Court

Agency Name

Amador County Board of Supervisors

Division, Board, Department, District, if applicable

Your Position

District 5

Supervisor

▶ If filing for multiple positions, list below or on an attachment.

Agency: \_\_\_\_\_

Position: \_\_\_\_\_

2. Jurisdiction of Office (Check at least one box)

- State
- Multi-County \_\_\_\_\_
- City of \_\_\_\_\_
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of \_\_\_\_\_
- Other \_\_\_\_\_

3. Type of Statement (Check at least one box)

- Annual: The period covered is January 1, 2012, through December 31, 2012.
- or-
- The period covered is \_\_\_\_\_, through December 31, 2012.
- Assuming Office: Date assumed 03/07/2013
- Leaving Office: Date Left \_\_\_\_\_ (Check one)
  - The period covered is January 1, 2012, through the date of leaving office.
  - The period covered is \_\_\_\_\_, through the date of leaving office.
- Candidata: Election Year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary

Check applicable schedules or "None."

▶ Total number of pages including this cover page: 1

- Schedule A-1 - Investments - schedule attached
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- Schedule C - Income, Loans, & Business Positions - schedule attached
- Schedule D - Income - Gifts - schedule attached
- Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

None - No reportable interests on any schedule

5. Verification

herein and in any attached schedules is true and complete. I acknowledge this is  
I certify under penalty of perjury under the laws of the State of California the

Date Signed September 29, 2013  
(month, day, year)

Signature

STATEMENT OF ECONOMIC INTERESTS  
PRACTICES COMMISSION  
COVER PAGE  
2012 APR -5 TIME: 28

Date Received  
Official Use Only  
3-29-2013  
JB

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
ONETO BRIAN

1. Office, Agency, or Court

Agency Name  
AMADOR COUNTY BOARD OF SUPERVISORS  
Division, Board, Department, District, if applicable  
DISTRICT 5  
Your Position  
SUPERVISOR

► If filing for multiple positions, list below or on an attachment.

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

2. Jurisdiction of Office (Check at least one box)

- State
- Multi-County SEE ATTACHED LIST
- City of \_\_\_\_\_
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of \_\_\_\_\_
- Other \_\_\_\_\_

3. Type of Statement (Check at least one box)

- Annual: The period covered is January 1, 2012, through December 31, 2012.
- or-
- The period covered is \_\_\_\_\_ through December 31, 2012.
- Assuming Office: Date assumed \_\_\_\_\_
- Leaving Office: Date Left \_\_\_\_\_ (Check one)
- The period covered is January 1, 2012, through the date of leaving office.
- The period covered is \_\_\_\_\_ through the date of leaving office.
- Candidate: Election year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 7

- Schedule A-1 - Investments - schedule attached
- Schedule A-2 - Investments - schedule attached
- Schedule B - Real Property - schedule attached
- Schedule C - Income, Loans, & Business Positions - schedule attached
- Schedule D - Income - Gifts - schedule attached
- Schedule E - Income - Gifts - Travel Payments - schedule attached
- or-
- None - No reportable interests on any schedule

5. Verification

herein and in any attached schedules is true and complete. I acknowledge that I certify under penalty of perjury under the laws of the State of California

Date Signed March 25, 2013  
(month, day, year)

Signature

**Additional Board and Commission seats held by Supervisor Brian Oneto in 2012**

- \*Central Sierra Planning Council/Economic Development District**
- \*Amador-Tuolumne Community Action Agency (A-TCAA)**
- \*Calaveras Amador Mokelumne River Authority (CAMRA)**
- \*California State Association of Counties (CSAC) (alternate member)**
- \*Central Sierra Child Support Agency (alternate member)**
- \*Local Agency Formation Commission (LAFCO) (alternate member)**
- \*Mountain Counties Air Basin (MCAB) and Mountain Counties Water Resources**
- \*Regional Council of Rural Counties (alternate member)**
- \*Sacramento Mother Lode Regional Association of Counties**
- \*Amador Fire Protection District (AFPD)**
- \* Amador Recreation Agency (ACRA)**
- \*Sierra Nevada Conservancy**
- \*Amador Commission on Aging (alternate member)**
- \* Motherlode Job Training (alternate member)**

**\*JURISDICTION OF OFFICE (MULTI-COUNTY)**

<b>Alameda</b>	<b>Glenn</b>	<b>Marin</b>	<b>Placer</b>	<b>San</b>	<b>Stanislaus</b>
<b>Alpine</b>	<b>Humboldt</b>	<b>Mariposa</b>	<b>Plumas</b>	<b>Mateo</b>	<b>Sutter</b>
<b>Amador</b>	<b>Imperial</b>	<b>Mendocino</b>	<b>Riverside</b>	<b>Santa</b>	<b>Tehama</b>
<b>Butte</b>	<b>Inyo</b>	<b>Merced</b>	<b>Sacramento</b>	<b>Barbara</b>	<b>Trinity</b>
<b>Calaveras</b>	<b>Kern</b>	<b>Modoc</b>	<b>San Benito</b>	<b>Santa</b>	<b>Tulare</b>
<b>Colusa</b>	<b>Kings</b>	<b>Mono</b>	<b>San</b>	<b>Clara</b>	<b>Tuolumne</b>
<b>Contra</b>	<b>Lake</b>	<b>Monterey</b>	<b>Bernardino</b>	<b>Santa</b>	<b>Ventura</b>

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
 (Ownership Interest is 10% or Greater)

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name \_\_\_\_\_

**1. BUSINESS ENTITY OR TRUST**

Name Brian Oneto Timber  
 Address (Business Address Acceptable) P.O. Box 95 Drytown, CA 95699

Check one  
 Trust, go to 2     Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**  
Logging

FAIR MARKET VALUE      IF APPLICABLE, LIST DATE:  
 \$0 - \$1,999      \_\_\_\_\_ / \_\_\_\_ / 12  
 \$2,000 - \$10,000      \_\_\_\_\_ / \_\_\_\_ / 12  
 \$10,001 - \$100,000      ACQUIRED      DISPOSED  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Partnership     Sole Proprietorship     Other

YOUR BUSINESS POSITION Owner

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

\$0 - \$499       \$10,001 - \$100,000  
 \$500 - \$1,000       OVER \$100,000  
 \$1,001 - \$10,000

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)**

None

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT     REAL PROPERTY

None

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property \_\_\_\_\_

Description of Business Activity or City or Other Precise Location of Real Property \_\_\_\_\_

FAIR MARKET VALUE      IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000      \_\_\_\_\_ / \_\_\_\_ / 12  
 \$10,001 - \$100,000      \_\_\_\_\_ / \_\_\_\_ / 12  
 \$100,001 - \$1,000,000      ACQUIRED      DISPOSED  
 Over \$1,000,000

NATURE OF INTEREST  
 Property Ownership/Deed of Trust     Stock     Partnership  
 Leasehold \_\_\_\_\_ Yrs. remaining     Other \_\_\_\_\_

Check box if additional schedules reporting Investments or real property are attached

**1. BUSINESS ENTITY OR TRUST**

Name Brian Oneto Cattle  
 Address (Business Address Acceptable) P.O. Box 95 Drytown, CA 95699

Check one  
 Trust, go to 2     Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

FAIR MARKET VALUE      IF APPLICABLE, LIST DATE:  
 \$0 - \$1,999      \_\_\_\_\_ / \_\_\_\_ / 12  
 \$2,000 - \$10,000      \_\_\_\_\_ / \_\_\_\_ / 12  
 \$10,001 - \$100,000      ACQUIRED      DISPOSED  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Partnership     Sole Proprietorship     Other

YOUR BUSINESS POSITION Owner

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

\$0 - \$499       \$10,001 - \$100,000  
 \$500 - \$1,000       OVER \$100,000  
 \$1,001 - \$10,000

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)**

None  
Cattlemen's Livestock Market  
Schweitzer's  
Escalon Livestock Market

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT     REAL PROPERTY

None

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property \_\_\_\_\_

Description of Business Activity or City or Other Precise Location of Real Property \_\_\_\_\_

FAIR MARKET VALUE      IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000      \_\_\_\_\_ / \_\_\_\_ / 12  
 \$10,001 - \$100,000      \_\_\_\_\_ / \_\_\_\_ / 12  
 \$100,001 - \$1,000,000      ACQUIRED      DISPOSED  
 Over \$1,000,000

NATURE OF INTEREST  
 Property Ownership/Deed of Trust     Stock     Partnership  
 Leasehold \_\_\_\_\_ Yrs. remaining     Other \_\_\_\_\_

Check box if additional schedules reporting investments or real property are attached

Comments: \_\_\_\_\_

2012.

①

Attachment to Schedule B - Interests in real property  
Amador County Assessor  
Parcel #

- A.P.N. # 008-130-017 Value ~~\$100,000~~ \$1,000,000.  
16850 State Highway 49 Plymouth, CA  
ownership.
- A.P.N. # 008-140-001-000 Value \$10,000 - \$100,000  
ownership.
- A.P.N. # 010-032-008-502 value under \$2,000  
ownership - mineral rights only.
- A.P.N. # 010-061-013-502 Value under \$2,000  
ownership - mineral rights only.
- A.P.N. # 010-062-002-502 Value under \$2,000  
ownership - mineral rights only.
- A.P.N. # 021-100-070-000 Value \$10,000 - \$100,000  
ownership.
- A.P.N. # 030-040-022-000 Value \$10,000 - \$100,000  
ownership.
- A.P.N. # 030-050-016-000 Value \$10,000 - \$100,000  
ownership
- 030-050-058-000 Value \$10,000 - \$100,000

2012

(2)

Attachment to Schedule B- Interests in Real Property.

Amador County Assessors Parcel #

A.P.N. # 030-040-035-000 Value \$10,000 - \$100,000  
ownership

A.P.N. # 040-030-078-000 Value \$10,000 - \$100,000  
ownership

A.P.N. # 025-020-026-000 Value \$10,000 - \$100,000  
ownership

A.P.N. # 025-050-016-000 Value \$2,000 - \$10,000  
ownership

\* Possessory Interest - Mining claim

Assessment # 860-000-186-000

Value \$ 5,541.00

**SCHEDULE B**  
**Interests in Real Property**  
 (Including Rental Income)

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
Amador County Assessors Parcel  
 CITY  
# 008-130-049-000

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                      DISPOSED

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold \_\_\_\_\_ Yrs. remaining       \_\_\_\_\_ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499       \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 None

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
Amador County Assessors Parcel  
 CITY  
# 008-130-048-000

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                      DISPOSED

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold \_\_\_\_\_ Yrs. remaining       \_\_\_\_\_ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499       \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 None

\* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*  
Joseph Vaiva/Doris Bertolotti  
 ADDRESS (Business Address Acceptable)  
P.O. Box 104 Drytown, CA 95699  
 BUSINESS ACTIVITY, IF ANY, OF LENDER  
 \_\_\_\_\_

INTEREST RATE      TERM (Months/Years)  
4 1/2 %       None      9 years

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000  
 Guarantor, if applicable

NAME OF LENDER\*  
 \_\_\_\_\_  
 ADDRESS (Business Address Acceptable)  
 \_\_\_\_\_  
 BUSINESS ACTIVITY, IF ANY, OF LENDER  
 \_\_\_\_\_

INTEREST RATE      TERM (Months/Years)  
 \_\_\_\_\_ %       None      \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000  
 Guarantor, if applicable

Comments: See attachments (pages 1 & 2) for rest of interests in real property.

**SCHEDULE D  
 Income - Gifts**

▶ NAME OF SOURCE (Not an Acronym)  
Amador Vintners  
 ADDRESS (Business Address Acceptable)  
P.O. Box 667 Plymouth, CA 95669  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10, 6, 12	\$ 70	2 tickets "Big Crush"
	\$ 150	3 tickets "Behind the Cellar Door"
	\$	
	\$	

▶ NAME OF SOURCE (Not an Acronym)  
 \_\_\_\_\_  
 ADDRESS (Business Address Acceptable)  
 \_\_\_\_\_  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
 \_\_\_\_\_  
 ADDRESS (Business Address Acceptable)  
 \_\_\_\_\_  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
Amador Winegrowers  
 ADDRESS (Business Address Acceptable)  
P.O. Box 718 Plymouth, CA 95669  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
7, 27, 12	\$ 25	1 ticket wine tasting at Amador County Fair
	\$	
	\$	

▶ NAME OF SOURCE (Not an Acronym)  
 \_\_\_\_\_  
 ADDRESS (Business Address Acceptable)  
 \_\_\_\_\_  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
 \_\_\_\_\_  
 ADDRESS (Business Address Acceptable)  
 \_\_\_\_\_  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

Comments: \_\_\_\_\_